Caution: DRAFT FORM

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If you have any comments on this draft form, you can submit them to us on our web site. Include the word DRAFT in your response. You may make comments anonymously, or you may include your name and e-mail address or phone number. We will be unable to respond to all comments due to the high volume we receive. However, we will carefully consider each suggestion. So that we can properly consider your comments, please send them to us within 30 days from the date the draft was posted.

SCHEDULE L (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Transactions With Interested Persons

► Attach to Form 990 or Form 990-EZ.

► To be completed by organizations that answered

"Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

OMB No. 1545-0047

Name of the organization

Employer identification number

Part I	Excess Benefit Transactions To be completed by organizations								n 990	-EZ, P	art V.	line 4	0b.	
													rected?	
1	(a) Name of disqualified person			(b) Description of transaction								Yes	No	
			-											
	er the amount of tax imposed on t									. \$				
3 Ent	er the amount of tax, if any, on line	e 2, abo	ve, rein	nbursed by	the orga	anization				▶ \$				
Part II	Loans to and/or From Interes To be completed by organizations			es" on Forr	n 990, Pai	rt IV, line 26	, or Form	990-E	Z, Part	: V, lin	e 38a			
(a) N	lame of interested person and purpose	(b) Loan to or from the organization?		(c) Ori principal		(d) Balar	(d) Balance due		(e) In default?		(f) Approved by board or committee?		(g) Written agreement?	
		То	From					Yes	No	Yes	No	Yes	No	
 Total					. ▶ \$									
Part III														
	To be completed by organizati	ons that	answe	red "Yes"	on Form	990, Part	IV, line 27	7.						
(a) Name of interested person		(b) Re	elationship		etween interested perso organization		on and the (c) An		mount of grant or type of as				е	
Part IV	Business Transactions Involve To be completed by organizati				on Form	000 Part	IV line 29	20 20	h or	280				
(a)	Name of interested person			p between			T					(a) Sha	aring of	
(a) maine of interested person				on and the	(c) Amount of transaction		(d) Description of transaction				OH	(e) Sharing of organization's revenues?		
												Yes	No	
For Panery	work Reduction Act Notice, see the Instru	ctions for	Form 99	0.	Cat No	o. 50056A	1	Sched	lule L (Form (990 or	990-F7	7) 2009	